

2268

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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	3548.1
	First Named Inventor	Christopher Petroff
	COMPLETE IF KNOWN	
	Application Number	10/712,860
	Filing Date	11/13/03
	Group Art Unit	1746
	Examiner Name	TBD

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Automated Fluid Control System and Process

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 11/13/2003 as United States Application Number or PCT International

Application Number 10/712,860 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/426,312	11/14/02	

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the

Patent and Trademark Office connected therewith

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OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

☒ Customer Number or Bar Code Label

22886

OR

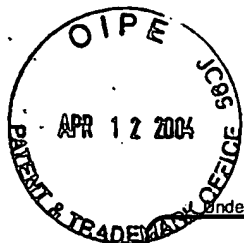
☐ Correspondance address below

Name					
Address					
Address					
City		State	CA	ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Christopher			Petroff		
Inventor's Signature	<i>Christopher Petroff</i>				Date 3/4/04
Residence: City	Groton	State	MA	Country	USA
Post Office Address	227 Riverbend Drive				
Post Office Address					
City	Groton	State	MA	ZIP	01450
Country	USA				

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 2

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Frank		McFall	
Inventor's Signature <i>Frank McFall</i>		Date <i>3/12/04</i>	
Residence: City	North Andover	State	MA
Country	USA	Citizenship	USA
Mailing Address 125 Blue Ridge Road			
Mailing Address			
City	North Andover	State	MA
ZIP	01845	Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Peter		Lobban	
Inventor's Signature		Date	
Residence: City	Los Altos	State	CA
Country	USA	Citizenship	USA
Mailing Address 59 Los Altos Square			
Mailing Address			
City	Los Altos	State	CA
Zip	94022	Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Richard		Brisk	
Inventor's Signature <i>Richard Brisk</i>		Date <i>3/4/04</i>	
Residence: City	Wayland	State	MA
Country	USA	Citizenship	USA
Mailing Address 27 Sedgemoor Road			
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City	Wayland	State	MA
Zip	01778	Country	USA

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet

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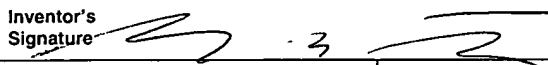
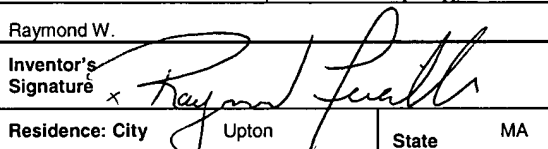
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Frank		McFall	
Inventor's Signature		Date	
Residence: City	North Andover	State	MA
		Country	USA
Mailing Address		125 Blue Ridge Road	
Mailing Address			
City	North Andover	State	MA
		ZIP	01845
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Peter		Lobban	
Inventor's Signature		Date	
<i>Peter Lobban</i>		3/8/04	
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		Country	USA
Mailing Address		59 Los Altos Square	
Mailing Address			
City	Los Altos	State	CA
		Zip	94022
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Richard		Brisk	
Inventor's Signature		Date	
Residence: City	Wayland	State	MA
		Country	USA
Mailing Address		27 Sedgemoor Road	
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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 2 of 2

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Citizenship	USA		
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Mailing Address			
City	North Andover	State	MA
ZIP	01845	Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Raymond W.		Leveille	
Inventor's Signature 		Date 3/08/04	
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Country	USA		
Citizenship	USA		
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Mailing Address			
City	Upton	State	MA
Zip	01568	Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country			
Citizenship			
Mailing Address			
Mailing Address			
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